Utah Department of Health, Bureau of Child Care Licensing Change of Category (Residential Certificate to Licensed Family) Inspection Checklist F

Prov	Provider Name: Phone #:						
	ress:						
Lice	nsing Specialist(s):						
Date	e:	Start Time:	am / pm	End Time:	am / pm		
Lice	nsor Notes:						
			INDOOF	R INSPECTION ITEMS			✓ = ComplianceO = Noncompliance
							N/A = Not Applicable
	ted Items			2 22 /=////			
	◆(Ask.) Will you be on the eral Indoor Environment			. , , ,			
A 2.	applicant's related children	n ages four through twe	lve who will be in th		f indoor play space for the reque hours? 90-4(7); 50-4(7) License Capacity	ested capacity, including the	
Bath	nrooms						
A 3.	(Observe.) Are single use	towels or individually la	abeled cloth towels	available? 90-16(4)			
Napı	ping						
A 4.	(Observe.) Is sleeping eq	uipment in good repair?	90-18(3)(a)	<u> </u>			

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	INDOOR INSPECTION ITEMS	✓ = ComplianceO = NoncomplianceN/A = Not Applicable
A 5.	♦(Ask.) Will sleeping equipment, sleeping bags, pillows, sheets and blankets be clearly assigned to one child, and cleaned and sanitized as needed, but at least weekly? If not clearly assigned to one child, will they be cleaned and sanitized prior to each use? 90-18(3)(b)-(c)	
A 6.	♦(Ask.) Will pillows be clearly assigned to one child and cleaned and sanitized as needed, but at least weekly? If not clearly assigned to one child, will they be cleaned and sanitized prior to each use? 90-18(4)	

		OUTDOOR INSPECTION ITEMS		✓ = ComplianceO = NoncomplianceN/A = Not Applicable
	eral Outdoor Environment - If the chang			
B 1.	31. (Measure if outdoor area has not been measured since 9/1/2008.) Is .) Is there at least 40 square feet of space for the requested capacity? 90-6(2); 50-6(2)			
	Area Area Measure	ments Total Area Square Footage	Total Licensed Capacity	
Out	door Play Equipment			
B 2.	(Observe.) Does outdoor stationary play of protective cushioning? 90-6(15)	quipment that will be used by any child in care have	a 3 foot use zone that is filled with grass or 6 inches or	
(Obs	serve all.)			
Do any of the following hazards exist on or within the use zone of any piece of stationary play equipment?				
	B 3. Entrapment hazards anywhere a chi 50-6(16)	d's feet cannot touch the ground? (Infants/toddler >	23 1/4", preschoolers > 25 1/4", school age > 33" 90-6(16);	
	B 4. Protrusion or strangulation hazards? (Except underneath equipment on a surface more than 48" high) 90-6(17); 50- 6(17)			
	B 5. Crush, shearing, or sharp edge hazards? 90-6(18); 50-6(18)			
	B 6. Tripping hazards? 90-6(19)			

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OUTDOOR INSPECTION ITEMS	✓ = Compliance O = Noncompliance N/A = Not Applicable
Transportation	
B7. Will at least one adult in each vehicle transporting children have current first aid and CPR certification? 90-21(2)	

	LICENSEE / CERTIFICATE HOLDER INTERVIEW QUESTIONS	✓ = ComplianceO = NoncomplianceN/A = Not Applicable
Pers	sonnel & Administration	
C 1.	Are all assistant caregivers at least 16 years of age, and will they always work under the immediate supervision of a caregiver who is at least 18 years old? 90-7(2)	
C 2.	Will assistant caregivers ever be left at the home alone with the children? 90-7(3)	
C 3.	Will each child be signed in and out by either the parent or provider, including date, time, and signature or initials? 90-13(3)	
Accidents, Injuries, Incidents		
C 4.	How and when will you notify parents of children's minor accidents and injuries? 90-13(6); 50-13(5)	
Eme	ergencies & Disasters	
C 5.	Will you update your emergency and disaster plan at least annually and note the date on the plan? 90-10(6)	
C 6.	Will you ensure your emergency and disaster plan is available for immediate review by parents and the Department? 90-10(7)	
Polices and Procedures		
C 7.	How will you ensure your written policies and procedures are available for review during business hours by parents and the Department? 90-8(10)	

RECORDS INSPECTION ITEMS	✓ = ComplianceO = NoncomplianceN/A = Not Applicable
Personnel Records	
D1. (Review.) Does the applicant have documentation of current first aid and CPR training for adults who will transport children in care? 90-21(2)	
Children's Records	
D2. ◆(Ask.) Will the applicant have current immunization records or documentation of a legally valid exemption for each enrolled child? 90-9(2); 50-9(2)	
D3. (Review.) Does the applicant have a form to document incident, accident, and injury reports? 90-9(2)(e)	
D4. ◆(Ask.) Will the applicant keep a six week record of incident, accident, and injury reports 90-9(2)(e)	
General Records	
D5. ◆(Ask.) If not participating in the Food Program, will the applicant keep a one week record of food served? 90-15(1)	

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